PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence of indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CALIBRIANT CORRESPONT	DENCE ADDRESS (Note: Use B	lock 1 for you change of address)	No	te: A certificate of r	nailing can only be used f	or domestic mailings of the
CORREST CORRESTON	JENCE ADDRESS (NOV. ON D	ock I to any change of money	Fee par hav	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
25943	7590 06/10	/2010		Certificate of Mailing or Transmission		
Schwabe Will	iamson & Wyatt		I h	I hereby certify that this Fee(s) Transmittal is being deposited with the United		
PACWEST CENTER, SUITÉ 1900 1211 SW FIFTH AVENUE PORTLAND, OR 97204				I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being fassimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						date indicated below. (Depositor's name)
,				Allyson Dahmen		(Signature)
				/Allyson Dahmen/		
1				July 30, 2010		(Dote)
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	₹	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/538,795	03/06/2006		Ronald J. Craswell		115710-149427	4331
TITLE OF INVENTION	N: BACKING UP A WIF	ELESS COMPUTING D	EVICE			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE		
nonprovisional	YES	\$755	\$300	\$0	\$1055	09/16/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
		2169	707-640000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 			For printing on the patent front page, list Schwabe, Williamson & Wyatt P.C. Schwabe, Williamson & Wyatt P.C.			
Change of corres	pondence address (or Cha B/122) attached.	ange of Correspondence	or agents OR, alternatively,			
			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			listed, no name will be printed.			
3. ASSIGNEE NAME /	AND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty	/pe)		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASS		piction of this form is two	(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Perlego Systems, Inc.			Gig Harbor, WA			
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
🖾 Issue Fee			☐ A check is enclosed.			
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies			The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 5(0)393 (enclose an extra copy of this form).			
5. Change in Entity St	atus (from status indicate	d above)				
NOTE: The Issue Fee a interest as shown by the	nd Publication Fee (if rec records of the United St	uired) will not be accepte ates Patent and Trademark	d from anyone other than Office	the applicant; a regi	stered attorney or agent; or	the assignee or other party in
Authorized Signature /Jo Ann Schmidt/			Date July 30, 2010			
Typed or printed name Jo Ann Schmidt			Registration No. 62,255			
This collection of infor	nation is required by 37	CFR 1.311. The informati	on is required to obtain or	retain a benefit by t	he public which is to file (a	nd by the USPTO to process)
an application. Confide submitting the complex this form and/or sugges Box 1450, Alexandria, Alexandria, Virginia 22	ntiality is governed by 3: ed application form to the tions for reducing this be Virginia 22313-1450. D 313-1450.	5 U.S.C. 122 and 37 CFR e USPTO. Time will var- arden, should be sent to the D NOT SEND FEES OR	1.14. This collection is e depending upon the induce Chief Information Offic COMPLETED FORMS	stimated to take 12 r ividual case. Any co cer, U.S. Patent and TO THIS ADDRESS	ninutes to complete, includ mments on the amount of Trademark Office, U.S. De SEND TO: Commissione	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.